## Application for Abatement of the Solid Waste Fee Financial Hardship

Resident Information:				
Name:				_
Last	First			MI
Address:				-
Number	Street			
City State 7in:				
City, State Zip: City/Town			 :e	Zip
City/ Town		Stat	.C	Ζίρ
Mailing Address (if different):				
Mailing Address (if different):	Number	Street		
	City/Town	Stat	 :e	 Zip
	·			
Assessor's Certification:				
This is to certify that		of _		
☐ HAS qualified for an exemption			\	
☐ Clause 41C-Elderly Pe		er, based on income	and assets)	
☐ CPA real estate tax exemption				
☐ HAS NOT qualified for an exemption based on Clause 41C or CPA.				
HAS NOT qualified for all exemption based on clause 410 of CFA.				
BOS Staff Verifying Certification Signature: Date:				
Date.				
Print Name and Title:				
Abatement:				
Based on the certification From the Assessor's Office, your application is				
☐ <b>Approved:</b> Please bring this completed application to the Collector's Office at the time you				
obtain your car sticker for access to the Disposal and Recycling Center. (You will still need to				
purchase bags for disposal of trash at the center).				
☐ <b>Denied:</b> Please pay your fee in order to receive a car sticker for access to the Disposal and				
Recycling Center.				
Signature:		Date:		
Both Manager and <del>Titl</del>				
Print Name and Title:				